

Contraceptive Coverage Rule

Mike Kreidler
Washington State
Insurance
Commissioner

FACT SHEET

Background

On Feb. 21, 2001, Insurance Commissioner Mike Kreidler filed his intent to consider a rule requiring all health insurance plans regulated by the Office of the Insurance Commissioner (OIC) that provide comprehensive prescription drug coverage to also provide coverage for prescription contraceptives. The Equal Employment Opportunity Commission's ruling in December 2000 and the Erickson vs. Bartell case decision in June 2001 laid the legal groundwork for concluding that failure of such plans to cover prescription contraceptives constitutes sex discrimination under Washington law.

On July 18, 2001, Commissioner Kreidler enacted the rule which states that it is an unfair practice for any health carrier to restrict, exclude, or reduce coverage or benefits under any health plan on the basis of sex. With the rule's adoption on Sept. 5, 2001, Washington state became one of 17 states with contraceptive coverage laws and currently, the only state with a contraceptive rule. The new rule takes effect on Jan. 1, 2002.

What does the rule say?

- **A health carrier cannot restrict,** exclude, or reduce coverage or benefits under any health plan on the basis of sex;
- **If a health plan** which provides generally comprehensive coverage of prescription drugs and prescription devices then it must also cover FDA-approved prescription contraceptives and devices;

WITH QUESTIONS, COMMENTS, COMPLAINTS
ABOUT INSURANCE (AUTO, LIFE, HOME,
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1-800-562-6900

- **Coverage of prescription contraceptives** includes coverage for medical services associated with the prescribing, dispensing, delivery, distribution, administration and removal of a prescription contraceptive to the same extent, and on the same terms, as other outpatient services;
- **A health plan cannot offer less** coverage for prescription contraceptives than it does for other prescription drugs and prescription devices;
- **Health plans cannot impose benefit waiting periods,** limitations, or restrictions on prescription contraceptives that are not required or imposed on other covered prescriptions drugs and prescription devices;
- **Health plans may require co-payments** and/or deductibles for prescription contraceptives and associated services to the same extent that they require it for other prescription drugs, devices and/or services.
- **A health plan may limit** contraceptive coverage to a closed formulary if they otherwise use a closed formulary, but the formulary must include each type of contraception as defined by this rule.

What contraceptives are covered?

United States Food and Drug Administration (FDA) approved contraceptive drugs, devices and prescription barrier methods, including contraceptive products declared safe and effective for use as emergency contraception by the FDA.

Who is covered by this rule?

All consumers in plans regulated by the OIC such as individual plans, small group plans or plans offered through an employer (as long as the plan is not self-funded by the employer) that have generally comprehensive prescription drug coverage and that are offered, issued or renewed on or after Jan. 1, 2002.

Any consumer who feels they have been treated unfairly regarding this subject should contact the toll-free Consumer Hot Line at the Office of the Insurance Commissioner at, **1-800-562-6900.**

FOR ADDITIONAL INFORMATION:

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